



What is a **Medial Branch Block (MBB) Injection?**

A local anaesthetic is injected around the nerve that sends the pain signal from the joint in your neck. The joints in the neck are called cervical facet joints. The nerve that supplies the joint structures is called the medial branch of the posterior dorsal ramus. By placing anaesthetic or a 'block' around the nerve, it stops the nerve sending the pain signal temporarily. Usually the injections are given over several levels in the spine. They may be performed on one side, or both sides, depending on where your symptoms are. The injections are more likely to improve symptoms in your neck than your arm. Sometimes if your neck joints are affected, you can refer pain into the back of your head.



Why do I need these injections?

The injection will help us to diagnose where the problem is.

- By injecting a local anaesthetic around the nerve that supplies
 the joint, this temporarily numbs the structures around the joint.
 It is useful to know whether you then notice any change in your
 symptoms in your neck, head or your arm while the anaesthetic is
 working for the first 6 hours after the injection.
- While the local anaesthetic is active you may notice some temporary numbness and/or weakness in the arm.

What next?

- If you notice a change in symptoms after the injection, then this
 confirms that the structures supplied by the nerve that was
 blocked (or anaesthetised) are, at least in part, responsible for
 those symptoms. You could then potentially be a candidate for
 a procedure called Rhizolysis.
- If you do not notice any change in symptoms, then the structures supplied from the nerve that was blocked (or anaesthetised) are not responsible for your symptoms.

Consent

Your Spinal Specialist will explain the risks and benefits to the procedure. These are also outlined in this leaflet. You will be asked to sign a Consent Form prior to the injection. If you have any questions, then please feel free to ask any member of the Spinal Team. There is also a patient information leaflet on consent, that you can read for more information - please ask if you would like a copy.

What are the risks?

Common

- Pain and bruising at the injection site. This will improve after a few days and not everyone experiences it.
- Feeling faint, as you can experience a temporary drop in blood pressure.

Rare

- Allergic reaction to the local anaesthetic, dye, antiseptic or plasters used. If you have any known allergies, then please advise your spinal medical team prior to the procedure.
- Infection around the needle site.

Very Rare

 Damage to the nerve root, which sits in front of the joint via trauma from the needle or a bleed around the nerve. Any of these complications can apply pressure to the nerve which may lead to an increase in arm symptoms. It is very rare for permanent damage to occur to a nerve outside the spinal column and the injection is done under X-Ray guidance, so the Consultant can accurately place the needle.

What are the benefits?

- Response to the local anaesthetic can confirm that we have identified the correct structure responsible for your symptoms.
 You may then be eligible for a further procedure called Rhizolysis (this procedure is also known as Frequency Nerve Ablation or Denervation).
- By reducing your pain, you may then be able to engage with other beneficial activities such as exercise or Physiotherapy.

How do I prepare?

Please advise us if any of the following apply:

- · You have tested positive for MRSA.
- You are feeling unwell or have a temperature.
- You have been admitted to hospital since being placed on the waiting list for the injection.
- There is any possibility you might be pregnant as the injection is done using an X-Ray.
- If you have a blood clotting disorder.
- If you are taking any medication that thins your blood. Please ask the spinal team if you are not sure about this.

Please ensure that a responsible adult accompanies you to the hospital and is able to drive you home afterward. This is because you will be unsafe to drive after the procedure due to the potential numbing effect of the local anaesthetic on your arm. We do not recommend that you use public transport. By the following day the numbness should have worn off.

What happens during the procedure?

You will be sent an appointment to come to the hospital to have your injection. Expect to be in the hospital for 3-4 hours, although often you may be able to go home more quickly than this. You will be asked to change into a hospital gown.

Your neck will be cleaned with antiseptic solution. The injections are done under X-Ray guidance. Local anaesthetic will be injected to numb the skin which can sting. A fine needle is then introduced into your neck down to the nerve to be blocked and more anaesthetic will be introduced around it. The needle will then be removed. By doing the injection with local anaesthetic there is an added advantage of assessing whether there is a change in your symptoms after the injection. You will be alert and able to record any changes whilst the anaesthetic is active (approximately up to 6 hours). The whole procedure takes around 30 minutes.

What happens after the procedure?

You will be transferred to a recovery area. When you feel sufficiently well enough and staff are satisfied with your vital signs, you will be discharged. The person accompanying you can then drive you home. Make a note of any changes in your neck, head and arm pain for the first 6 hours after the injection. You may choose to use the pain diary at the end of this leaflet to record the change in pain levels as they occur.

It's very common for the pain to return the following day after the injection, once the local anaesthetic has worn off. We therefore recommend that you continue with your usual pain relief medications.

The following day you can gradually and gently return to normal day to day activities. We would advise you to avoid strenuous activity for 48 hours after the injection.

Will I have a follow up appointment?

No, you will remain on a 'patient initiated follow up' (PIFU) pathway for 6 months to 1 year. This means that you will need to contact your spinal specialist's secretary to book a follow up if you want to be reviewed. The numbers to contact are at the end of this leaflet.

Who do I contact if I have concerns?

If you are worried about any symptoms after your injection you can contact the nursing Team. Remember it is common to experience temporary increase in symptoms in the neck and arm after the local anaesthetic wears off. You should manage this by taking pain relief as prescribed by your GP and adjusting your activities.

Contact us if:

 Your injection site shows signs of infection such as discharge or redness/swelling lasting more than the initial few days or if you have a fever or feel unwell. You experience unremitting severe pain, or new pain, weakness or altered sensation in a different place or limb from your symptoms prior to the injection.

If you are unable to reach the team or you have an urgent query outside of the hours the nurses are available, contact your GP or local Out of Hours Service.

Useful Contact Numbers:

For Medical Enquiries Call:

New Hall Hospital Switchboard: 01722 422 333 and speak to the operator then ask to be directed to: The Outpatient Department.

To book a Follow Up Appointment Call:

New Hall Hospital Switchboard: 01722 422 333 and speak to the operator:

NHS Patients: Ask to be directed to Spinal Secretaries

<u>Private Patients:</u> Ask to be directed to your Consultants Private Secretary

Pain **Diary:**

Pain score: 0 is no pain, 10 is very severe pain.

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0 1 2 3 4 5 6 7 8 9 10



	Neck Pain	Head Pain	Arm Pain
Prior to injection			
First 6 hours after injection			
24 hours after injection			
Two weeks after injection			
One month after injection			
Two months after injection			

References and useful links:

https://www.nhs.uk/conditions/steroid-injections/

https://ramsayhealth.co.uk/hospitals/new-hall-hospital/treatments/spinal-services, click on the services button for more information

https://tamethebeast.org

British National Formulary

https://bnf.nice.org.uk/treatment-summary/oral-anticoagulants.html